

The Commonwealth of Massachusetts

ANNUAL REPORT

OF THE

TRUSTEES

OF THE

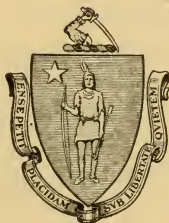
DANVERS STATE HOSPITAL

FOR THE

YEAR ENDING NOVEMBER 30,

1933

DEPARTMENT OF MENTAL DISEASES



PUBLICATION OF THIS DOCUMENT APPROVED BY THE COMMISSION ON ADMINISTRATION AND FINANCE  
00. 3-'34. Order 841.

OCCUPATIONAL PRINTING PLANT  
DEPARTMENT OF MENTAL DISEASES  
GARDNER STATE COLONY  
EAST GARDNER, MASS.

# DANVERS STATE HOSPITAL

[Post Office Address: Hathorne, Mass.]

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CLARENCE A. BONNER, M.D., *Superintendent*.  
EDGAR C. YERBURY, M.D., *Assistant Superintendent*.  
SALOMON GAGNON, M.D., *Senior Physician*.  
HENRY A. TADGELL, M.D., *Senior Physician*.  
CHARLES C. JOYCE, M.D., *Senior Physician, Pathologist*.  
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CHARLES H. ENDEE, D.M.D., *Dentist*.  
GRACE H. KENT, Ph.D., *Psychologist*.

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MR. ARTEUR E. REED, *Chief Hospital Supervisor, Male Department*.  
MISS OLIVE F. ESTEY, R.N., *Principal of School of Nursing*.  
MISS GRACE MANNING, R.N., *Chief Hospital Supervisor, Female Dept.*  
MR. CARLTON B. MOEHER, *Maintenance Foreman*.  
MR. WILLIAM GORDON, *Head Farmer*.  
MISS MARJORIE FISH, *Head Occupational Therapist*.

## CONSULTING PHYSICIANS

S. CHASE TUCKER, M.D., *Surgeon*.  
PHILIP R. DWYER, M.D., *Ophthalmologist*.  
JOHN D. ADAMS, M.D., *Orthopedic Surgeon*.  
RALPH E. STONE, M.D., *Internist*.  
FAUL E. TIVNAN, M.D., *Roentgenologist*.

## TRUSTEES' REPORT

*To His Excellency, the Governor and the Honorable Council:*

The Trustees of the Danvers State Hospital respectfully offer the following annual report, including the report received by us from the Superintendent and the reports received by him from the various departments:

The Board has continued to hold monthly meetings at the hospital, for conference with the Superintendent, concerning the development of the institution and the upkeep of the plant.

In the report of last year reference was made to the new dining room building. We are pleased to state that this building was completed and put into operation April 19, 1933. It is a fine building with a modern kitchen and a dining room for patients and one for employees providing excellent cafeteria food service.

The annual report offers an opportunity to study the functions of the various departments and one is impressed with these efforts, all of which are directed to the care and comfort of the mentally sick patient. The care begins with the admission of the patient. The departmental reports indicate the various forms of treatment that are given, ending with the discharge of the patient and the continued oversight maintained by our social service department and clinical facilities

for advice to the patient, who has been enabled to return to the community. To those of us who have been on the Board for a number of years it is pleasing to note the improved conditions within the hospital for the mentally sick and the further arrangements to help and guide the patient after he has been restored to mental health in making a readjustment in the community.

The upkeep of the buildings has been diligently preserved and many repair changes have been made.

The sinking of wells near the Power House should mean a direct economy in water costs. The farm, as usual, has provided fresh vegetables and milk for the patients, and also has served as an opportunity for the therapeutic application of work.

During the last year there have been but few changes in employment. Most of our employees have been grateful to have the opportunity of working and have retained their positions so that there are only a few changes to report.

The number of admissions during the year were 481 males and 392 females, making a total of 873. This is an increase of 35 over the preceding year. The hospital has continued its efforts in the prevention of mental illness in the community by adding to its mental hygiene clinics for advice and guidance to both children and adults.

We believe that the chapel should be enlarged to accommodate 800 patients, whereas at the present time only 300 can be seated in this building. In order to enlarge this building it will be necessary to do away with approximately 17 rooms, which now house about 35 employees. This would call for the construction of the new building for married couples and one which is very much needed by the institution.

We would recommend enlarging both the male and female hydrotherapy buildings. An additional floor erected would give us opportunity to treat a larger number of patients more efficiently, and we strongly recommend fire-proofing plans in the main building. This would include fire-proof flooring and fire-proof staircases; also to rewire basements and attics throughout the older buildings of the institution. This type of wiring is the so-called open type and we feel that it should be in conduit.

A new and modern laundry building is greatly needed in order to care for the needs of the institution in this respect.

A fire alarm system would be of great advantage, and also the replacement of certain sprinkler heads with more modern types is very desirable.

We believe that the institution has been conducted with care and economy throughout the past year.

Respectfully submitted,

S. HERBERT WILKINS, *Chairman.*

JAMES F. INGRAHAM

DR. ARTHUR C. NASON

WILLIAM W. LAWS

MRS. ANNA P. MARSH

MRS. ANNIE T. FLAGG

ALBION L. DANFORTH

*Trustees.*

## SUPERINTENDENT'S REPORT

*To the Board of Trustees of the Danvers State Hospital:*

The fifty-sixth annual report of the Superintendent for the fiscal year ending November 30, 1933, is respectfully submitted.

The clinical reports and statistics relating to patients are for the period including September 30, 1933.

### MOVEMENT OF POPULATION

The hospital year opened on October 1, 1932 with 2,075 patients in the hospital, 252 on visit, 7 on escape, and 9 in family care, making a total of 2,343.

The year ended on September 30, 1933 with 2,134 patients in the hospital, 355 on visit, 5 on escape, and 8 in family care, making a total of 2,502.

The number of admissions during the year: 481 male; 392 female; total 873, an increase of 35 over the preceding year.

There were 4 voluntary patients admitted during the past year; 19 patients were transferred from other institutions; 284 men and 208 women were admitted on

temporary care papers and 79 men and 50 women were admitted on thirty-five day observation papers.

#### FIRST ADMISSIONS

There were 676 patients admitted to this or any hospital for the first time, which is an increase of 22 over the preceding year.

#### DAILY POPULATION

The total average population for the year ending September 30, 1933, was 2,104, an increase of 33 over last year. There were 3,216 patients treated during the year as compared with 3,160 in 1932.

There were 259 patients who died in the institution during the year, which is 42 less than the preceding year.

#### DISMISSALS

Four hundred fifty-five patients were discharged from the institution during the past year; 276 men and 179 women. Classified as to their condition on discharge; 31 as recovered; 255 as improved; 38 as unimproved; and 110 as without psychosis. The figures for the preceding year were as follows: 48 as recovered; 250 as improved; 29 as unimproved; and 90 as without psychosis.

On September 30, 1933 there were 368 patients on trial visit in care of friends or under hospital supervision as compared with 268 in 1932.

Since the organization of the hospital, 32,153 patients have been admitted and 29,651 discharged.

#### MEDICAL ADMINISTRATION

The following changes in personnel of the Staff occurred during the year:

*Appointments:* — Dr. Guy C. Randall, appointed assistant physician April 1, 1933.

*Resignations:* — Dr. Carol Schwartz, resigned February 6, 1933. Dr. Charles H. Endee, dentist, resigned November 4, 1933.

*Clinical Assistants:* — Benjamin Singerman, Flora Marie Remillard, Edward E. Shibel, H. Parker Wetherbee, Julius W. Cohen, James Raymond Hurley.

#### MEDICAL SERVICE

As in former years, the medical service has continued to function very efficiently in lieu of the vacancies that have been carried in the medical staff throughout the year. The usual daily ward rounds as well as the weekly night trips have been continued so that all patients have been seen at frequent intervals. Staff conferences have been held daily for the purpose of discussing the diagnosis, treatment, and visit or discharge of patients. We have again been disturbed some by a few sporadic cases of basillary dysentery (His-Y type) but fortunately through careful, early segregation an epidemic was prevented.

During part of July and August the Superintendent spent some time abroad where he was able to visit several clinics in Europe. In September and October, Dr. H. Archer Berman was granted a leave of absence for the purpose of study at the New York Neurological Institute.

It is pleasing to report that a fewer number of accident cases requiring first aid treatment have occurred in the community.

During the year many requests for lectures in psychiatry have been made by the various nurses' training schools in the county, and courses of lectures have been given by the various staff members. If the demand for this service increases during the next year it will be necessary to arrange a definite time when all these schools can meet together. Many lectures and talks have been given by the Superintendent and other members of the staff, to various clubs, parent-teachers' associations, and societies.

Our consulting physicians and surgeons have continued to render very faithful and efficient service to the hospital when called in on special cases, and for this I wish to express my sincere appreciation. The following report indicates the operative procedures done by them:

Abortion, removal of placenta, 1; appendectomy, 4; Colostomy, 1; drainage appendiceal abscess, 1; enucleation of eye, 1; enucleation of a post-cervical gland for biopsy, 1; herniotomy, 1; hysterectomy (sub-total), 1; incision and drainage



of infected toe, 1; incision and drainage of left tibia (osteomyelitis), 1; incision and drainage septic sore foot, 1; incision and drainage sub-fascial abscess, 1; laporatomy (exploratory), 1; mastoidectomy, 1; oophorectomy, 1; open reduction fractured right patella, 1; reduction Colles's fracture, 1; removal of foreign body from vertebral column, 1; salpingectomy, 1; tenorrhaphy, 1; tonsils and adenoids, 6.

#### HYDROTHERAPY DEPARTMENT

No changes have been made in this department during the past year and it has continued to function very actively. New plans have been discussed for the enlargement of the present hydrotherapy suites as they are equipped with antiquated apparatus and are inadequate for the proper treatment of the numerous newly admitted cases. In spite of this fact, the department has given many more treatments than were administered during the preceding year. The trained hydrotherapists have continued to instruct each new nurse and attendant in the various hydrotherapeutic measures before they are permitted to administer any form of treatment.

Dr. Rebekah Wright, of the Department, spent September and October at the hospital instructing the physicians, nurses and attendants in new methods which are approved. She also supervised much of the work during this time and I wish to extend my appreciation for her painstaking and valuable assistance.

The sedative forms of treatment have continued to bring about improvement in the overactive and excited types of cases, while the tonic baths have created marked improvement in the depressed types.

A report of this department shows that the following treatments were given during the year:

The application of the wet sheet pack was prescribed for 812 patients. This represents a total of 20,054 packs for 56,206 hours of treatment. In the continuous bath 420 patients were treated for a period of 14,009 hours, which represents a total of 3,713 baths. 7,691 tonic bath treatments were also given to 629 patients.

#### PHYSIOTHERAPY DEPARTMENT

The physiotherapy department continues to be one of the most active departments in the hospital. There has been a marked increase in the number of patients treated, and in the total number of treatments given. The results obtained have been most satisfactory. The work is still carried out by a trained physiotherapist in charge, with the assistance of nurses assigned from the nursing service. Plans have been made to provide instruction in massage for the student nurses. Lectures and demonstrations will be given by the physiotherapist, and the students themselves will have opportunities to do practical treatments.

During the year, ending November 30, 1933, a total of 9,640 treatments has been given. A classification of these treatments is given below:

Infra-red radiations, 4,573; diathermy treatments, 951; sinusoidal current treatments, 1,418; ultra-violet ray, water cooled, 513; ultra-violet ray, air cooled, 1,197; auto-condensation treatments, 54; electro-desiccation, 18; massage treatments, 916; total, 9,640.

#### PERSONAL HYGIENE DEPARTMENT

The personal hygiene department continues to be one of the active centers in the hospital. The work is carried on by a trained worker, assisted by patients adapted for this type of occupation. We have especially endeavored to treat the deteriorated types of patients by this means of therapy, and the results have been gratifying.

During the year ending November 30, 1933, a total of 12,914 treatments has been given. A classification is given below: Scalp treatments, 264; massage, 366; hair waves, 2,499; manicures, 3,010; shampoos, 2,787; hair cuts, 3,988; total, 12,914.

#### VENEREAL CLINIC

This clinic has been functioning regularly during the past year as heretofore, with the treatment of a large number of cases, both male and female. A day has been reserved for the treatment of men as well as a day for women. Various arsenical preparations were used, being supplemented with bismuth and mercury salts.

Malarial therapy continued to play an important role in the treatment of selected cases usually to supplement the medicinal treatment. While several cases have returned each week for follow-up treatments, no physicians have taken the opportunity of sending cases in from the community as in former years.

#### DENTAL SERVICE

All newly admitted cases have been given a thorough dental examination and such prophylactic work as would enhance the health of the patient has been done. For a brief period of time we were without a dental hygienist and since November 4th we have had to rely on a local dentist to do our emergency work because of the resignation of Dr. Charles H. Endee, who left to enter private practice. Since that time the periodical examinations and treatments were temporarily suspended.

The work accomplished for the year is indicated in the following table:

*December 1, 1932 to December 1, 1933*

Cleanings . . . . .	920
Extractions . . . . .	1,067
Fillings . . . . .	492
(Silver cement and silver amalgam, 125; silver amalgam, 144; cement, 22; porcelain, 70; zinc oxide and eugenol, 115; sterident, 1; temporary cement, 2; red copper cement, 9; cutta percha, 4.	
Prosthetics . . . . .	92
(Completed full plates, 12; completed bridge, 1; repaired full plates, 13; miscellaneous corrections, 56.	
Oral treatments in general . . . . .	772
(Vincent infections, canker sores, gingivitis, abscesses.	
Referred to x-ray . . . . .	44
New patients examined . . . . .	764
Re-examinations . . . . .	259
Total number of patients treated . . . . .	2,731
Sent to Danvers for extraction . . . . .	3
Lectures . . . . .	7

#### ENTERTAINMENTS

During the winter months regular talking pictures and dances have been held weekly for our patients. In order to include a larger group at the picture entertainments we have shown them both in the afternoon and evening. In this way we have been able to entertain a group from some of the more active wards, which was formerly excluded because of lack of space in the chapel. In the summer season the dances and pictures were discontinued and baseball games were played for the enjoyment of our patients, between the hospital team and those from the surrounding towns. Because of the great distances it was not feasible to schedule games with other hospital teams as we had done in former years. The various Auxiliaries of the American Legion have continued to bring weekly entertainments to our ex-service men, and at the same time distribute sweetmeats, tobacco and cigarettes to them. Several times during the year special parties were given under the direction of the occupational therapy department. It was through the kindness of Rev. Remi Schuver, Mr. George Libby, and Mr. Angus Murdock that professional entertainments were given during the year. We are indebted to Mr. Darius A. Ives and Mr. Samuel Harris for giving some very excellent band concerts during the summer season. It was through the kindness of Mr. Emil Fuchs, president of the Boston Braves Baseball Company, that a group of patients were able to witness a league game on September 1st.

#### PSYCHIATRIC CLINICS

The out-patient clinics for patients away from the hospital on visit have been continued regularly throughout the past year, being held in Gloucester, Haverhill, Lynn, Malden, Newburyport and Salem. Many cases have been contacted through these clinics and it is interesting to note how large these clinics have grown during the past few years. While occasional cases are referred for consultation by physicians in the community, this service is not being used to its fullest extent.

## ADULT MENTAL HYGIENE CLINIC

This clinic has continued to function as in former years, serving the community in and around Lynn because of its location at the Lynn Hospital. The clinic meets once a week on Wednesdays from 2 to 4 P.M., with a psychiatrist, social worker and medical student in attendance.

## X-RAY DEPARTMENT AND LABORATORY SERVICE

The following is a list of the work done in the x-ray and clinical laboratories for the fiscal year of 1933:

Autopsies . . . . .	33
Bacterial cultures . . . . .	107
Basal metabolic rate determinations . . . . .	22
Blood chemistry:	
Blood sugar . . . . .	45
N. P. N. . . . .	14
Sugar tolerance . . . . .	1
Blood cultures . . . . .	11
Red blood cells . . . . .	1,020
White blood cells . . . . .	1,096
Differential counts . . . . .	236
Hemoglobin determinations . . . . .	1,020
Coagulation time . . . . .	11
Bleeding time . . . . .	7
Gynecological smears . . . . .	243
Spinal fluids:	
Gold sols . . . . .	198
Cell counts . . . . .	5
Sputum examinations . . . . .	90
Stool examinations . . . . .	21
Urinalyses . . . . .	4,262
X-ray plates taken . . . . .	1,077

The work during the past year has shown a considerable increase in the clinical work done and a decrease in the number of autopsies. There was an increase of practically 1,300 urinalyses over the previous year, and over 200 more x-ray plates were taken than in the previous year. There was also a considerable increase in the number of blood counts and differential counts, as well as in the number of sputa examined. There was a decrease in the number of gold sols done on spinal fluids, which, in all probability, is due to the fact that permission for lumbar puncture is now required.

## OCCUPATIONAL THERAPY DEPARTMENT

This year we have carried an average of twelve classes, including 2 work-shop groups, 6 ward classes and 4 physical education groups, the report of which will follow below. This is 2 less than the number carried last year, due to a decrease in the number of students coming to us, and to additional work being done on the hospital library. Types of patients reached in these treatment groups include admissions, chronic, acute, disturbed and tubercular.

There have been all together 474 patients under treatment, averaging 211 per month. Of the total number 167 have been promoted into hospital industry, and 100 have gone home on indefinite visit.

A slight change in our record system has been instigated. Individual progress charts on patients are now being kept, rather than several combined on one sheet. These are reviewed by the staff monthly. Also, the charts are placed in the hands of the physicians on duty over each week-end for reference while talking with relatives and friends of patients. Semi-annual notes are made and put on file in the case histories.

A summary of finished craft articles for the year, all of which are kept on as practical a basis as possible for immediate use in the hospital, is as follows:

Table runners, embroidered and woven; rugs, woven, braid-weave, hooked; mats; woven and knitted couch covers; knitted wash rags; applique and tie and dye curtains; cafeteria doilies; crocheted and raffia doilies; pillows, crayon, painted



and embroidered; bed trays; bookcases; door stops; leather articles (keytainers, scissors cases, book covers and suede purses); wall panels, block print, crayon, painted and applique; carved wooden wall plaque; knotted window and key cords and napkin rings; copper desk equipment — blotter pad corners, paper cutters, letter holders and pen holders. Additional copper articles include ash trays and tea tiles. Cribbage and checker boards; bird houses; woven handbags with carved tops; picture frames; carved boxes and lampshades.

An exhibit of work done in classes by patients was arranged at the annual Topsfield Fair in September. Also a display from the industrial department showing the shoe, clothing, broom and brush construction carried on there.

Special parties and entertainments on holidays arranged by the Department and given in the Chapel for all patients in general included, Christmas week, Valentine Frolic, St. Patrick's Card party, Hallowe'en dance and Thanksgiving Card party. Entertainment at these affairs is supplied, for the most part, by the patients, supervised by the therapists. A "tumbling act" staged by ten male patients was provided at the St. Patrick's party. The effort and cooperation of the participants is worthy of comment in passing. Smaller parties have been held from time to time for members of our classes only.

Other group projects carried on throughout the year for the purpose of recreational and social stimulation include:

Planting and care of the Shop flower garden. Each season patients plan a somewhat different lay-out, both as to flower arrangement and garden equipment. Flowers are cut for Shop ornamentation.

Evening Ward groups on the male and female services, as begun the previous year were continued. Student therapists have conducted these in an effort to stimulate ward spirit. Cards, competitive games, reading, music — orchestral and singing — have comprised the program.

*O. T. Garret Club.* Our Club has progressed during the year. Additional equipment has been added to the room in the form of curtains, posters, bookcase and ping pong table. Here groups of acute cases are brought for individual work in an informal, clubroom atmosphere. Miscellaneous groups have been supervised in simple dramatics, and have produced, in finished form, a shadow play from Lowell's "Bigelow Papers". This was presented before a group of visitors. Also, a one-act play with a cast of twelve, was staged at the Christmas Party and was received with enthusiasm. Patients are encouraged to plan their own costumes. It is felt that this type of treatment offers a less formal basis of approach than that of regular class work; requires concentration and use of imagination on part of patient; combines spirit of fun and work, and demands good group cooperation.

Community Sings were conducted bi-weekly during the summer in place of the dances which were suspended from May to October. These were attended by both the men and women, with an average attendance of about eighty. Led by two volunteer song leaders and accompanied by a five-piece patient orchestra, semi-classical, popular, old favorites and request numbers were sung. The leaders also conducted singing in conjunction with some of the out-door band concerts.

A small hospital publication in the form of a one-piece news sheet was started, and has continued to be issued every other week. The purpose of this paper has been to serve as a medium for contributions from the patients consisting of literary material, comments and suggestions, as well as carrying general hospital news and activities — ward and personnel. Interest has been stimulated through special holiday numbers, contests, etc. The paper is put out in mimeograph form, the therapists being assisted in the printing by patients.

The Occupational Therapy Department has taken over the library this past year. Several hundred old books, beyond a useful stage, were discarded and the remainder classified and catalogued according to the Dewey Decimal standard system. New books have been purchased and donations received, amounting to a total of 615 to date. Total number of volumes in the library at present is 1,650, of which 500 are non-fiction. We wish to thank those who have been, and are, contributing toward helping us to expand the library. Arrangements have been made with the Committee of the Peabody Institute Library for a monthly loan of books to be circulated through the hospital library. This has proven highly satisfactory during the six months it has been in operation, and we extend to the



Committee our appreciation. Lists of new books and those especially recommended are posted in the library, and on the cafeteria bulletin boards. Patients unable to come to the library alone are brought by therapists at regular times each week.

There have been in our training course this past year, 2 groups of students, numbering 5 and 3 respectively, from the Boston School of Occupational Therapy. Each group spent 6 months here in psychiatric instruction and practical experience.

Each 3 months a 21 hour course is given to the affiliating nurses in theory and actual craft technique and analysis. The senior nurses of the hospital training school also receive a similar course of instruction during their last year.

The Department has recently begun work on a movie project with the Eastman Movie Camera owned by the hospital. A program, to be carried out during the coming year, will show daily life of the patients, all forms of treatment employed, as well as the extent of the hospital lay-out, buildings and property. These reels will be used for educational and lecture purposes. Credit is due the Psychology Department for aid in mapping out the program to be followed.

A total of 225 patients, averaging 140 per month, have come under this form of treatment. Classes are held on the wards, in the Chapel and out-of-doors. They are divided according to the patients' conditions — deteriorated, stuporous, excited and improved.

The improved classes participate in marching, days order, followed by a period of free play including volley ball, indoor baseball, basketball, tennis and dancing. Work with the deteriorated groups includes simple marching, very simple days order, relay games, dancing and music. Special periods of music have been tried with disturbed patients and have proven quieting in many instances.

During the summer months the out-of-doors classes hike, play tennis and baseball. The addition of tennis to the curriculum this year has been popular, the hospital court being used. It has been advantageous both from an instructive point of view and as a means of improved motor coordination for cases requiring that. Deteriorated groups are worked with in the backyard enclosures where simple exercises and games are carried on.

#### CONSTRUCTION REPORT

The following construction report shows the work of the department for the past year:

*Carpenters:* Making of desks in the shop. Building cement bulk head in "H" basement. General repairs after fire at hennery. Building box stalls and making general repairs in barn. Building 4 bathrooms in Employees' Home. Building 7 fire escapes at Middleton Colony. Putting wood floor in female tunnel. Changing doors and making general repairs in cafeteria. Putting in hangers for lights in surgical building. Building of bull pens in barn. Repairs on brooder houses at hennery. Putting hay hoisting machine in barn. Putting cement troughs in piggery basement. Putting in slate for shower baths at Farm Hall. Fitting up coat room on ward G-4. Making general repairs at Cottage No. 7. Removing plaster lath and furring from coil rooms in main building. Making windows, frames and setting stone work in Rear Center. Making laundry boxes, furniture, tables, etc. in the shop. Putting in overhead track and hoist at the Power House. General repairs on the cement room in the salvage yard. Making woodwork for carts, wagons, plows, wheelbarrows, etc. in the shop. Putting in panels, window guards, etc., in the chapel. Building of office for Arts and Crafts Department. Building of 30 settles in the shop. Making Morris chairs and settles for I-1 sun parlor. Repairs on coal trestle at the Power House. Making of steel tables for the cafeteria. Moving portable building and tables to old filter beds. Trimming of pine grove and trees on avenues. Repairs on roofs, slates and gutters of main building. Putting in gates and house at foot of hill. Building cement walls, driveway and garage at Cottage No. 3. Inside repairs and all new floors in Cottage No. 5-A. New sills and repairs in Harrington Building at Middleton Colony. Four ward dining rooms remodelled to dormitories in main building. Forms for cement curbs on street in front of main building. General repairs on female summer house. Putting new roof on morgue. Building garage for Cottage No. 2. General repairs on male summer house. Making furniture for cafeterias in the shop.

*Painters:* Painting walks and rooms in Rear Center basement. Inside painting of two cow barns. Glass set for year: 1,877 lights. Painting inside hennery where burned. Painting of floors on ward I-1, A-1 sun parlor, and Rear Center. Painting inside of Community Hall. Painting new water sections in Employees' Home. Painting rooms and wards J-3, B-1 and J-2. Finishing of furniture for cafeterias. Painting rooms and wards A-1, and I-3. Painting outside main building. Coating of all paper roofs. Painting inside Cottage No. 1. Painting hoist and inside work at ice plant. Painting outside doors of cottages. Finished and papered inside of Cottage No. 5-A. Old dining rooms finished in main building. Painted inside of Grove Hall. Painted female summer house. Painted kitchen and corridors at Middleton Colony.

*Masons:* Cemented basement floor under new kitchen. Brick room for janitor and storage in new basement. Putting in sewer lines at barn. Topping of chimneys on main building and Middleton Colony. Building bulkhead at "H" basement. Building catch basins at barn. Pouring of cement at piggery. Cutting windows, bricking up and cementing Rear Center. Laying 20" cement pipe line near old filter beds. Plastering new water sections at Employees' Home. Laying and cementing car tracks in new basement. Cutting joints and repointing in new kitchen. Building stone walls and cement cappings for Cottage No. 3. Building stone gate posts and sentry house at foot of hill. Building of catch basins in Service Building. Pouring and finishing cement curbs in front of main building. Cement floor in garage of Cottage No. 3. Building brick garage for Cottage No. 2.

*Blacksmith:* Shoeing of horses. Making of stone drags. Sharpening of pickaxes, drills and chisels. Hangers for pipe lines and plumbing. Repairs on carts, wagons, plows and farm machinery. Making of steel refuse tubs and barrels. Rebuilding of coal cars. Making of steel tables. Building of iron gates. Repairs on bars, grates, etc. for Power House.

#### ENGINEERS' REPORT

All of the new cafeteria and kitchen equipment was installed by this department. This work was completed so that the equipment was put to use for the first time on April 19, 1933. Following this we installed the equipment in the ice cream making room.

A system of driven wells was installed near the Power House to furnish water for cooling the ammonia condenser. The quantity of water obtained so far is not enough to take care of the requirements. The results prove, however, that it will pay to add more wells to the system.

A travelling crane of seven tons capacity was designed and built for our engine room. This crane is a valuable addition to our engine room equipment as it makes possible the ready handling of heavy engine parts.

A line of underground electric cable was installed from the main power plant to Middleton Colony. A branch line was extended from the main line to the stone crusher. A total of about 8,000 feet of cable was installed. This cable replaced an old pole line, which was in need of extensive repairs. Our policy has been to replace all overhead lines with underground cables so that storms would not be apt to cripple our electric service.

This installation of underground cable does away with all overhead lines except 2 which are used for walk lighting only.

At the barn we made extensive changes in the power grinders and hay hoist drives.

A new Jay Bee grinder was installed with individual electric drive. The hay hoist was moved from the barn floor to a scaffold near the front of the barn and was equipped with individual electric drive.

The Banner Root Cutter was set up in the barn cellar and driven from the motor located there. All of these machines were crowded together before the above changes were made.

The new arrangement allows plenty of room to work in and makes far neater housekeeping and less fire hazard.

## FARM REPORT

Farm production was maintained at the same level as in former years. On account of excessively dry weather early in the season, and an abnormally heavy rainfall in autumn, the potato crop did not come up to expectations.

There were produced 458,125 quarts of milk, an average for the year of 1,255 quarts daily; 3,762 bushels of potatoes; 550 tons of ensilage; 260 tons of hay; 17,397 doz. of eggs; 93,000 lbs. of pork; 17,000 lbs. of beef; 2,700 lbs. of veal; 7,400 lbs. of fowl; 4,700 lbs. of chicken, as well as an ample supply of vegetables for the needs of the institution.

A new driveway, 15 feet wide, was built from Maple Avenue to the garage in rear of Cottage No. 3. In order to get the proper grade for this road, the road bed had to be excavated to a depth of 3 feet in places, and, to keep these cuts from sliding into the road, a retaining wall was built of field stone and cement with a gate-post of the same construction at each side of the entrance. About 400 square yards of this road was built of field stones with the surface macadamized. The whole has a most artistic appearance.

Three hundred and fifty square yards of road, finished as above, were built back of the laundry. The grounds on each side of this road were graded and, in places, terraced with turf as space was not available for long sloping lawn.

A new driveway, leading from Maple Avenue to a garage adjacent to Cottage No. 2, is in process of construction. Although well started, this will not be finished until next Spring or Summer.

A new parking space, provided for visitors, has been excavated between the male attendants' home and the male wards. This space, about 3000 square yards in extent, was dug out to a depth of 2 feet, filled in with field stone and crushed rock, and will be macadamized in the Spring or sooner if weather permits. Much of the material dug out was used in grading and filling up the old sand pit (which will be mentioned later). This supplied much work for the teams.

The main driveways were kept in their usual condition during the Summer. Whenever a hole in the surface was detected, it was promptly filled with gravel and tar. Three thousand six hundred square yards of farm roads were resurfaced with gravel and kept in reasonable condition all Summer by using a tractor drawn road scraper at stated intervals.

Not much was done in the way of new construction of walks during the past season. A small tar walk, about ninety square yards, was built around the physician's house at Middleton Colony. The rest of the walks around the institution and Middleton Colony were kept in repair the same as the main driveways.

The abandoned sand pit along the right-of-way of the Boston & Maine Railroad has been filled in and the surrounding knolls have been leveled down, so that what was formerly a mud hole is now available for cultivation. The material excavated from the parking place on the hill was used for filling the above.

The death of the lessee of the land on which stood an old cider mill, near Howe station, allows this part of a field to revert to the institution. The cider mill has been removed, the side filled in and graded and all that is necessary to make this corner fit for cultivation is the removal of several trees, for which, the permission of the tree warden of Middleton must first be had.

The field surrounding the cemetery north of Middleton Colony has been cleared, plowed twice and much debris of all kinds carted away. When a little draining has been done, and everything is ready to have this finished in the Spring, about 3 more acres of arable land will be added to the farm and the whole appearance of that section much improved.

Work is still being carried on on a small corner beyond the stone crusher in an endeavor to square off the side of field No. 28. A neat four-foot woven wire fence has been erected and the trees, stumps and rocks are being removed as fast as conditions will permit. This job, in all probability, will be completed by the time the field is ready to plant in the Spring.

Work is still being vigorously conducted in an endeavor to civilize the abandoned filter beds and to render them and the adjoining land, heretofore designated as "too rough for cultivation" fit for growing crops.

A good woven wire fence has been erected along Dayton Street, replacing the old picket fence which had rotted away and fallen down and a detail of about 100



patients, with wheelbarrows and shovels, worked on the filter bed embankments all Summer, leveling them. No doubt this field will be fit for the plow after several Summer's work on them. One hundred more feet of 24-inch cement pipe has been added to that already laid from the stone crusher towards the Ipswich River and much fill from the filter bed embankments is being hauled over this pipe so it can be plowed over and made part of adjoining field.

The roots, rocks and rubbish from around the filter beds as well as the debris from the cemetery field have been used to fill in the very unsightly abandoned sand pit near the Colony power house. Most of this has been covered over and will soon be in shape to be made into lawn. A tennis court was built at Middleton Colony, which called for considerable labor and materials of inexpensive nature. The material excavated from the court was largely used for covering over the rocks, roots and debris filling the sand pit near Colony power house.

A little landscape work was done around the physician's house at the Colony, which will doubtless improve in appearance as the trees and shrubs grow larger.

Appropriately spaced by a well-known landscape architect, specimen evergreen trees from 5 to 8 feet in height have been planted on the steep embankment which surrounds the hospital proper. These trees have a very favorable appearance from all points and presumably will enhance still further the view of the hospital as they increase in size.

#### RELIGIOUS SERVICES

The regular religious services have been held each Sunday as previously. At 9:30 A.M. Catholic services were held for all patients in the main hospital and the Colonies, by Rev. Remi B. Schuver. In the afternoon at 2 o'clock, Protestant services were held by various clergymen from Danvers and environs. Other Catholic and Protestant services were held at less frequent intervals at the Middleton Colony for those patients who were unable to get to the chapel. Once each month the Jewish patients met with Rabbi Moses L. Sedar.

The following clergymen have assisted us during the year: Rev. Remi B. Schuver, Rabbi Moses L. Sedar, Reverends Russell D. Cole, Paul Mayer, William Grimes, Nathan Matthews, Hazel Kirk, Kenneth Henley, Wilmert Wolfe, John Knight.

#### ACKNOWLEDGEMENTS

I wish to express my sincere appreciation and gratitude to the Board of Trustees for their continued support and helpfulness in the problems of administration that have arisen. To all hospital officers and employees, as well as to the many friends who have contributed their time and money to help bring pleasure and comfort to my patients, I wish to express my thanks.

Respectfully submitted,

C. A. BONNER, M.D.

*Superintendent.*

#### REPORT OF TRAINING SCHOOL FOR NURSES

*To the Superintendent of the Danvers State Hospital:*

It is my privilege and pleasure to submit the forty-fourth annual report of the Training School for Nurses.

*Personnel*, November 30, 1933: Principal of the School of Nursing, 1; Assistant Principal of the School of Nursing, 1; Chief Hospital Supervisor, 1; Assistant Supervisor, day, 1; Assistant Supervisor, night, 1; Head Nurses, graduates of Danvers State Hospital, 9; Hydrotherapist, 1.

There were 186 requests for information in regard to the training school. Thirty-one blanks were returned. Twenty-three students were accepted. Eight have withdrawn. Three applicants changed their minds. Two references were not satisfactory. Two were unable to report because of injuries in automobile accident, one on the waiting list.

On November 30, 1933 our students were as follows: Seniors, 14; Intermediates, 17; Probationers, 16.

The affiliated nurses for the year ending November 30, 1933 were as follows:

*Miller's River Hospital:* Jessie E. Briggs, Stella Rines, Geneve N. Perry, Elizabeth Cembalisky, Bertha Dufour, Stasia Ambrozy.

*Somerville Hospital:* Elva C. Johnson, Janet Jenkins, Helen C. Renton, Mary Clark, Mary Tessini, Nora E. O'Connor, Eva Salvuccio, Margaret McTiernan, Ruth Schworm.

*Chelsea Memorial Hospital:* Adeline Dentone, Rebecca Hammerman, Anne Statt.

*New England Sanitarium:* Paul S. Furman, Carlyle B. Shultz, David Stone.

Graduate Nurses for three months' course:

*Boston City Hospital:* Mary Hally.

*J. B. Thomas Hospital:* Agnes Callan.

*Lowell General Hospital:* Esther A. Swallow.

The graduating exercises were held June 29th. The following nurses received diplomas:

Ruth Marie Arris  
Pauline Marie Atspins  
Dolores Billington Caney  
Bessie Myrtle Carter  
Anna Mary Casale  
Amy Alice Clark  
Gertrude Arlene Colby  
Margaret Theresa Copley

Helen Catherine Dort  
Hazel Ruby Hopping  
Dorothy Marion Maynard  
Evelyn Augusta McCormack  
Frances Louise McNeill  
Mary Agnes Purcell  
Wanda Stepenuk

Bessie Myrtle Carter was the honor student winning the scholarship prize awarded each year by the Alumnae Association.

In closing I wish to thank the members of the medical and hospital staff for their help and cooperation during the past year.

Respectfully submitted

OLIVE F. ESTEY, R. N.

*Principal of the School of Nursing.*

## SOCIAL SERVICE REPORT

*To the Superintendent of the Danvers State Hospital:*

I herewith submit the report of the Social Service Department for the year December 1, 1932 to November 30, 1933.

During this year 1,477 cases have been referred to our department. Of these, 984 were referred to us for the first time. Most of our work was with patients in the hospital, in 879 instances. We did some work in the cases of 132 patients, who are on visit from the hospital. There were 41 new patients at the Adult Mental Hygiene Clinic in Lynn. Thirty-two former patients continued treatment during the year at the clinic. One hundred and thirty-eight new cases were seen at our several Child Guidance Clinics. Twenty-four cases, who had been active before this year in these clinics, continued the treatment during the year.

Five hundred and seventeen histories were taken at the hospital. Three hundred and one histories of hospital patients were taken in the community. In making investigations for diagnoses, 71 were in cases of conduct disorders, 6 employment situations, and 27 investigations were made of statements made by patients themselves. These were made to affirm or disprove statements made by the patient that would have a bearing on the hospital staff's decision in their cases. Investigations were made in 40 instances where conflicting or contradictory statements were made by various informants. Forty-three patients were referred to us for investigation of their home conditions prior to discharge on visit from the hospital. In 132 cases we attempted supervision of patients at home on visit from the hospital.

The Adult Mental Hygiene Clinic in Lynn average 7 patients at each clinic. During June it was necessary to have the aid of a second psychiatrist in order to study before the summer all the cases then referred to the clinic. Physicians at the out-patient clinics of the Lynn Hospital referred 12 of the new cases to our clinic. Five others were referred to the clinic by former patients of the clinic. We hope that next year more adolescents may be referred to us.

*Lynn Child Guidance Clinic:* Ten children have been receiving speech training from the speech teacher. One boy was given special help in reading by a clinic psychologist. He improved in his reading and has been promoted. His present teacher says he reads as well as other children in his grade. The social agencies in

Lynn cooperate in referring cases to us and in helping us carry out treatment. They have sent us 17 new cases during this year. The schools have sent 9, and private physicians, 5. Seven were referred by their parents. In 2 of these families older children had been previously treated at the clinic.

The types of problems have been habit problems, school difficulties, conduct disorders, personality deviations, and organic conditions. Study often revealed personality difficulties as causative factors of behavior problems.

An attempt was made to locate cases of post-encephalitis in Lynn, but all the children referred with this possibility proved to be cases of retarded mental development.

*The Gloucester Child Guidance Clinic* has met weekly in the Hovey School, where accommodations are rather limited. Eleven new cases have been examined; also 9 school clinic children. In 2 instances mental retardation was the chief problem. One was in need of habit training, 2 were sex offenders. One boy has been placed in the Lawrence Training School with excellent results. One boy, whose chief problem was difficulty in reading, was given intensive training by the clinic psychologist. The clinic feels the lack of cooperating social agencies. It is to be hoped that in the following year more use will be made of the clinic, especially by the schools.

*Newburyport:* A Child Guidance Clinic was opened in Newburyport on November 10, 1933, to meet twice a month. It has a desirable location at the Health Center, where social agencies of the city have their headquarters. In the two sessions of clinic 3 cases have been seen: one of pre-school age where habit training is necessary, and two children whose maladjustment in school led to their being referred to the clinic for study. The clinic has made an auspicious beginning. Local agencies are given excellent cooperation; the number of cases already referred indicates the readiness of the community to accept the clinic as an active part of it.

*Haverhill:* The elementary schools have been the clinic's generous referring agency, sending by far the largest percentage of children. Only 3 of our new cases have been of high school age. It is gratifying that several schools outside of Haverhill have accepted clinic help more than they did last year. The majority of these school children were behavior problems and not primarily retarded. An appreciable number of patients presented a need for medical attention, prior to any other treatment. These were referred to private physicians, who, it is hoped, will reciprocate as freely as public health agencies have done. Removal from home was advised for several children, but either finances or parental consent prevented this being carried out in all but 2 instances. These 2 children were placed in proper schools and are adjusting nicely.

For another year the clinic might well strive to make more contacts with recreational, vocational and educational clubs, as well as churches, so that both child and community may feel that the clinic is trying to be an integral part of the community.

*Lawrence:* Lawrence Mental Hygiene Clinic meets at the new Y.W.C.A. building. The building is centrally located, very pleasant, and has ample accommodations for the clinic. So few cases were referred to the clinic last winter and spring that this fall the clinic has decided to meet twice a month instead of weekly. Whether because of this, or for other reasons, more cases are being referred to us now than heretofore. Several cases have been referred by the schools for examination and recommendation as to placement in school. Three were referred by schools outside of Lawrence because of conduct disorder.

*Beverly:* Most of the children at our Beverly Habit Clinic are referred to us by the Beverly Health Center, whose nurses come upon these problems while making their visits in the homes. Some children are referred by the schools where the children are not adjusting, either in school work or in association with their fellow pupils. Two parents heard of the clinic — one through a newspaper notice — the other through hearing the clinic psychiatrist speak to a church group — and wanted to take advantage of the clinic for their children, who were presenting problems with which they themselves could not cope.

It is a pleasure to be associated with the Beverly Health Center, whose work is so whole-heartedly accepted by the community.



Miss Alice Williams and Miss Constance Leavitt left in the spring after completing their student's training here.

Miss Elizabeth Schuh, also a student during the year, stayed on for the summer months to help in the department during vacation time.

Miss Frances Spiegle, a graduate of Simmons College School of Social Work, spent a month with us during the summer.

Mrs. Doris Day, a former student in the department, helped during the absence of the head worker.

This fall, Miss Sarah Karp, a graduate of New York University, and Miss Priscilla Brown, a graduate of Smith College and the Nursery Training School, have come as students in the department.

Respectfully submitted,

MARY HENDERSON HOLLAND,  
Head Social Worker.

## REPORT OF EXTRA MURAL WORK WITH CHILDREN

*To the Superintendent of the Danvers State Hospital:*

The Child Guidance Clinics proceed in much the same manner as in the last 2 or 3 years. We continue to meet in Lynn at the Child Welfare House; in Haverhill at the High School; in the Health Center at Beverly. In Gloucester, we now meet at the Hovey School because it is more centrally located than was the Lufkin School. When the new Young Women's Christian Association building in Lawrence was opened, we transferred our quarters there at the invitation of the International Institute, who had previously provided us with rooms. The new accommodations in Lawrence are most attractive and comfortable, and are in the down town section — a decided advantage over the former arrangements. Not only have we changed our Lawrence address, but we are holding the clinic on the first and third Fridays of the month in order to cover the Newburyport district, where a new clinic was established this fall. Here we meet on the second and four Fridays. This has condensed work in the Lawrence Clinic to the point of where we are quite rushed. The Newburyport Clinic, too, has been busy from the start, and we feel the cooperation from the community and the local agencies has been most gratifying.

Twenty communities were visited and recommendations were made to their respective school superintendents following the examination of the 412 retarded pupils whose names were submitted to this hospital. Now that the law permits the examination of children not necessarily retarded (but actual or potential behavior problems) this work is perhaps a bit broader in its scope than last year. In these clinics, we often see a number of other cases informally about whom no actual report is made in writing.

During the year ending November 30, 1933, there was a total of 162 Juvenile Court cases examined by members of the medical staff under provisions of Chapter 215, Laws of 1931.

For exact figures of the case work with children in the Child Guidance Clinics, I refer you to the annual reports of the Social Service Department and Department of Psychology.

Respectfully submitted,

DORIS M. SIDWELL, M.D.

## PSYCHOLOGICAL REPORT

*To the Superintendent of the Danvers State Hospital:*

The following report for the Department of Psychology covers the year ending November 30, 1933:

Our personnel included 3 full-time assistants, Dorothy C. McLeod remaining with us as first assistant and two junior assistants being engaged on one-year appointments. Lucy C. Sanborn and Alice W. Schoenfuss served as junior assistants from December to July, and Margaret C. Taylor and Kathleen C. Arnold for the rest of the year. Two students, James Hurley and H. Parker Wetherbee, worked with us for a few weeks during the summer.

Newly admitted patients under 60 years of age were observed by some member of the department, for such psychometric examination as seemed suitable in each case. 459 hospital patients were examined with a fair measure of adequacy, and

40 additional ones were given a partial examination. One hundred and thirty-five children were examined in the various child guidance clinics conducted by Dr. Sidwell, 383 retarded children were tested in the school clinics, and there were 172 court examinations. Also, 18 unclassified cases were referred to us for special examination. The total number of subjects individually examined was 1,207.

Newly admitted students of the Essex County Agricultural School were given a group examination, at the opening of the school year, to aid the school in classifying them for instruction. One hundred and thirty-one students were thus examined in September.

At the child guidance clinics any children whose retardation in school progress seemed out of proportion to the mental retardation indicated by mental tests we observed with special care for any evidence of inherent difficulty in learning to read. Six children were brought to the clinic each week for intensive tutoring, for periods ranging from 6 weeks to 6 months. Miss McLeod had 2 such cases at Beverly, Miss Sanborn had 2 at Haverhill and 1 at Gloucester, and Miss Schoenfuss had 1 at Lynn. Each of these children was studied as an individual problem, in an attempt to find the best method for overcoming the difficulty. The methods devised for these children have become a part of our permanent equipment for instructional work with cases of reading disability.

From January to June Miss Sanborn gave special instruction, almost daily, to one of the juvenile patients of the hospital. It has not been found possible to continue this work since Miss Sanborn left, but we can claim positive results for the period of instruction. The child showed sufficient responsiveness to prove that a psychotic child is not necessarily beyond the reach of training.

Ten hours' instruction was given in the hospital training school, this entire course being repeated every 3 months for a new group of affiliate nurses. A four-hour course in psychometrics, treated as a unit, was given by the junior members of the department in rotation; and 6 selected topics in general psychology, somewhat detached, were divided among the 3 assistants, each of whom prepared 2 lectures and presented them 4 times.

The cost of our routine examinations was kept at a minimum by the preparation in our office of any test forms which can be printed on the mimeograph. We are regularly using over 30 forms thus obtained, some of them being prepared by the thousand. Many other materials for psychometric work have been made in our own workshop.

Two research studies which had been in progress for several years were completed, one in July and one in September. They have been accepted for publication in psychological journals, to appear sometime in 1934. Three other research projects are well advanced.

Many inquiries have been received from outside concerning the various tests developed in this hospital and standardized by the department. In view of the difficulty and delay involved in bringing a paper to publication, it has seemed advisable to give out freely, for the use of other clinics, any unpublished material which is in shape to be used. A London psychiatrist who visited our department in May is using several of our tests in his own work and has introduced some of them into 4 other clinics of London.

Respectfully submitted,

GRACE H. KENT, Ph. D.

*Psychologist.*

### VALUATION

November 30, 1933

#### REAL ESTATE

Land, 517.68 acres . . . . .	\$99,112.00
Buildings . . . . .	2,718,674.71

\$2,817,786.71

#### PERSONAL PROPERTY

Travel, transportation and office expenses . . . . .	\$4,233.37
Food . . . . .	14,952.54
Clothing and materials . . . . .	19,797.98
Furnishings and household supplies . . . . .	134,879.24
Medical and general care . . . . .	11,534.57
Heat and other plant operation . . . . .	10,400.50
Farm . . . . .	66,471.72

Garage and grounds . . . . .	5,868.37
Repairs . . . . .	20,895.05
	<u>\$289,033.34</u>
SUMMARY	
Real estate . . . . .	\$2,817,786.71
Personal property . . . . .	289,033.34
	<u>\$3,106,820.05</u>

## FINANCIAL REPORT

To the Department of Mental Diseases:

I respectfully submit the following report of the finances of this institution for the fiscal year ending November 30, 1933.

## STATEMENT OF EARNINGS

Board of patients . . . . .	\$106,076.46
Personal services:	
Reimbursement from Board of Retirement . . . . .	233.93
Sales:	
Food . . . . .	\$285.44
Clothing and materials . . . . .	40.14
Furnishings and household supplies . . . . .	12.86
Medical and general care . . . . .	60.59
Heat and other plant operation . . . . .	187.35
Garage and grounds . . . . .	124.08
Repairs ordinary . . . . .	110.20
Farm: (itemize) pigs and hogs, \$89.24; ice, \$176.75; sundries, \$229.07. . . . .	495.06
Total sales . . . . .	1,315.72
Miscellaneous:	
Interest on bank balances . . . . .	\$15.02
Rents . . . . .	690.00
Total miscellaneous . . . . .	705.02
Total earnings for the year . . . . .	<u>\$108,331.13</u>

## MAINTENANCE APPROPRIATION

Balance from previous year, brought forward . . . . .	\$18,732.11
Appropriation, current year . . . . .	627,500.00
Total . . . . .	<u>646,232.11</u>
Expenditures as follows:	
1. Personal services . . . . .	\$325,599.12
2. Food . . . . .	85,707.97
3. Medical and general care . . . . .	10,044.55
4. Religious instruction . . . . .	1,916.27
5. Farm . . . . .	22,162.82
6. Heat and other plant operation . . . . .	87,526.14
7. Travel, transportation and office expenses . . . . .	7,549.72
8. Garage and grounds . . . . .	4,601.31
9. Clothing and materials . . . . .	17,791.85
10. Furnishings and household supplies . . . . .	31,755.85
11. Repairs ordinary . . . . .	16,900.93
12. Repairs and renewals . . . . .	5,587.61
Total Maintenance Expenditures . . . . .	<u>617,144.14</u>
Balance of maintenance appropriation, Nov. 30, 1933 . . . . .	<u>\$29,087.97</u>

## SPECIAL APPROPRIATIONS

Balance December 1, 1932, brought forward . . . . .	\$9,105.75
Appropriations for current year . . . . .	—
Total . . . . .	<u>\$9,105.75</u>
Expended during the year (see statement below) . . . . .	\$8,557.00
Reverting to Treasury of Commonwealth . . . . .	98.10
(Star balances below that are reverting) . . . . .	<u>8,665.10</u>
Balance November 30, 1933, carried to next year . . . . .	<u>\$450.65</u>

APPROPRIATION	Act or Resolve Ch. Year	Amount Appro- priated	Expended during Fiscal year	Total Expended to Date	Balance at end of year
Renovation of rear. . . . .	115-1930	—	—	—	—
Center — construction . . . . .	245-1931	\$300,005.40	\$629.93	\$300,005.40	—
Furnishings — kitchen and cafeteria equipment . . . . .	245-1931 170-1932	36,994.60	7,927.07	36,543.95	\$450.65
Purchase of x-ray equipment. . . . .	245-1931	4,000.00	—	3,929.11	70.89*
Purchase of land . . . . .	460-1931	150.00	—	122.79	27.21*
		<u>\$341,150.00</u>	<u>\$8,557.00</u>	<u>\$340,601.25</u>	<u>\$548.75</u>



## PER CAPITA

During the year the average number of patients has been, 2,115.

Total cost of maintenance, \$617,144.14.

Equal to a weekly per capita cost of (52 weeks to year), \$5.61.

Total receipts for the year, \$108,331.13.

Equal to a weekly per capita of, \$.98.

Total net cost of maintenance for year, (Total maintenance less total receipts), \$508,813.01.

Net weekly per capita, \$4.63.

Respectfully submitted,

HULDA ARONSON

*Treasurer.*

## STATISTICAL TABLES

AS ADOPTED BY THE AMERICAN PSYCHIATRIC ASSOCIATION PRESCRIBED  
BY THE MASSACHUSETTS DEPARTMENT OF MENTAL DISEASES

TABLE 1. *General Information*

Data correct at end of hospital year November 30, 1933

1. Date of opening as a hospital for mental diseases, May 13, 1878.

2. Type of hospital: State.

3. Hospital plant:

Value of hospital property:

Real estate, including buildings . . . . .	\$2,817,786.71
Personal property . . . . .	289,033.34

Total . . . . .	\$3,106,820.05
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Total acreage of hospital property owned, 517.6.

Total acreage under cultivation during previous year, 362.5.

4. Officers and employees:

	Actually in Service at End of Year			Vacancies at End of Year		
	M.	F.	T.	M.	F.	T.
Superintendents . . . . .	1	—	1	—	—	—
Assistant physicians . . . . .	7	2	9	3	—	3
Clinical assistants . . . . .	2	—	2	—	—	—
Total physicians . . . . .	10	2	12	3	—	3
Stewards . . . . .	1	—	1	—	—	—
Resident dentist . . . . .	—	—	—	1	—	1
Pharmacists . . . . .	1	—	1	—	—	—
Graduate nurses . . . . .	—	24	24	—	—	—
Other nurses and attendants . . . . .	85	106	191	—	—	—
Occupational therapists . . . . .	—	5	5	—	—	—
Social workers . . . . .	—	4	4	—	—	—
All other officers and employees . . . . .	81	58	139	4	2	6
Total officers and employees . . . . .	178	197	365	8	2	10

NOTE:— The following items, 5-10 inclusive, are for the year ended September 30, 1933.

5. Census of patient population at end of year:

	Actually in Hospital			Absent from Hospital but Still on Books		
	M.	F.	T.	M.	F.	T.
WHITE						
Insane . . . . .	977	1,121	2,098	178	190	368
Epileptics . . . . .	1	—	1	—	—	—
Mental defectives . . . . .	—	1	1	—	—	—
All other cases . . . . .	6	3	9	—	—	—
Total . . . . .	984	1,125	2,109	178	190	368
OTHER RACES:						
Insane . . . . .	14	11	25	—	—	—
Total . . . . .	14	11	25	—	—	—
Grand Total . . . . .	998	1,136	2,134	178	190	368
				Males	Females	Total

6. Patients under treatment in occupational therapy classes, including physical training, on date of report . . . . .	74	164	238
7. Other patients employed in general work of hospital on date of report . . . . .	634	426	1,060
8. Average daily number of all patients actually in hospital during year . . . . .	989	1,115	2,104
9. Voluntary patients admitted during year . . . . .	3	1	4
10. Persons given advice or treatment in out-patient clinics during year . . . . .	325	103	428

TABLE 2. *Financial Statement*

See Treasurer's report for data requested under this table.

NOTE: The following tables, 3-20, inclusive, are for the statistical year ended September 30, 1933.

TABLE 3. *Movement of Patient Population*

	REGULAR COURT COMMITMENT (INSANE)			VOLUNTARY			TEMPORARY CARE			OBSERVATION			TOTAL ON BOOKS		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Patients on books of Institution September 30, 1932 . . . . .	1,077	1,244	2,321	-	-	-	1	-	1	16	5	21	1,094	1,249	2,343
Admissions during year:															
First Admissions . . . . .	257	244	501	1	1	2	68	25	93	56	24	80	382	294	676
Readmissions . . . . .	55	68	123	2	-	2	15	10	25	20	8	28	92	86	178
Transfers from other hospitals for mental diseases . . . . .	7	12	19	-	-	-	-	-	-	-	-	-	7	12	19
Total received during year . . . . .	319	324	643	3	1	4	83	35	118	76	32	108	481	392	873
Total on books during year . . . . .	1,396	1,568	2,964	3	1	4	84	35	119	92	37	129	1,575	1,641	3,216
Discharged from books during year:															
As recovered . . . . .	-	-	-	-	-	-	17	1	18	12	1	13	29	2	31
As improved . . . . .	93	100	193	1	-	1	18	10	28	15	18	33	127	128	255
As unimproved . . . . .	12	10	22	-	-	-	5	8	13	3	-	3	20	18	38
As without psychosis . . . . .	2	2	4	1	-	1	39	13	52	43	10	53	85	25	110
Transferred to other hospitals for mental diseases . . . . .	15	6	21	-	-	-	-	-	-	-	-	-	15	6	21
Died during year . . . . .	118	131	249	-	-	-	3	3	6	2	2	4	123	136	259
Total discharged, transferred and died during year . . . . .	240	249	489	2	-	2	82	35	117	75	31	106	399	315	714
Insane patients remaining on books of hos- pital at end of hospital year:															
In hospital . . . . .	980	1,129	2,109	1	1	2	2	-	2	15	6	21	998	1,136	2,134
On parole or otherwise absent . . . . .	178	190	368	-	-	-	-	-	-	-	-	-	178	190	368
Total . . . . .	1,158	1,319	2,477	1	1	2	2	-	2	15	6	21	1,176	1,326	2,502

Note: — The total males in the Insane and Observation groups will not balance through to September 30, 1933, owing to the fact that 2 males on Observation had a C.L.S. during the year to an R.C. commitment, thus making the males on Observation status minus 2 and the males on R.C. status 2 more than would be expected.

TABLE 4. *Nativity of First Admissions and of Parents of First Admissions*

NATIVITY	PATIENTS			PARENTS OF MALE PATIENTS			PARENTS OF FEMALE PATIENTS		
	M.	F.	T.	Fathers	Mothers	Both Parents	Fathers	Mothers	Both Parents
United States . . . . .	154	159	313	76	78	63	71	74	61
Africa . . . . .	—	—	—	—	1	—	—	—	—
Austria . . . . .	1	2	3	2	2	2	2	2	2
Canada <sup>1</sup> . . . . .	26	34	60	38	32	26	51	49	42
China . . . . .	1	—	1	1	1	1	—	—	—
England . . . . .	7	9	16	15	12	11	15	10	9
Finland . . . . .	2	—	2	2	2	2	—	—	—
France . . . . .	2	—	2	2	2	2	1	1	—
Germany . . . . .	2	2	4	3	3	3	7	8	7
Greece . . . . .	2	—	2	3	3	3	1	1	1
Holland . . . . .	—	—	—	—	—	—	—	1	—
Hungary . . . . .	—	—	—	—	—	—	1	1	1
Ireland . . . . .	17	12	29	41	44	38	41	43	37
Italy . . . . .	13	5	18	20	20	19	10	9	9
Norway . . . . .	1	1	2	2	1	1	1	1	1
Poland . . . . .	7	3	10	9	9	9	3	3	3
Portugal . . . . .	1	—	1	2	2	2	—	—	—
Russia . . . . .	10	9	19	15	15	15	13	13	13
Scotland . . . . .	—	—	—	—	3	—	—	1	—
Sweden . . . . .	2	3	5	4	5	4	3	3	3
Turkey in Europe . . . . .	2	1	3	1	1	1	2	2	2
Wales . . . . .	—	—	—	—	—	—	—	1	—
Other countries . . . . .	6	2	8	9	9	9	4	3	3
Unascertained . . . . .	1	2	3	12	12	10	18	18	15
Total . . . . .	257	244	501	257	257	221	244	244	209

<sup>1</sup>Includes Newfoundland.





TABLE 5. *Citizenship of First Admissions*

	Males	Females	Total
Citizens by birth . . . . .	154	159	313
Citizens by naturalization . . . . .	33	27	60
Aliens . . . . .	47	33	80
Citizenship unascertained . . . . .	23	25	48
Total . . . . .	257	244	501

TABLE 6. *Psychoses of First Admissions*

PSYCHOSES	M.	F.	T.	M.	F.	T.
1. Traumatic psychoses . . . . .				2	—	2
2. Senile psychoses . . . . .				7	15	22
3. Psychoses with cerebral arteriosclerosis . . . . .				71	65	136
4. General paralysis . . . . .				18	3	21
5. Psychoses with cerebral syphilis . . . . .				8	1	9
6. Psychoses with Huntington's chorea . . . . .				—	1	1
7. Psychoses with brain tumor . . . . .				—	—	—
8. Psychoses with other brain or nervous diseases (other diseases) . . . . .				6	6	12
9. Alcoholic psychoses, total . . . . .				26	1	27
Delirium tremens . . . . .	2	—	2			
Korsakow's psychosis . . . . .	1	—	1			
Acute hallucinosis . . . . .	8	—	8			
Other types, acute or chronic . . . . .	15	1	16			
10. Due to drugs and other exogenous toxins, total . . . . .				1	—	1
11. Psychoses with pellagra . . . . .				—	—	—
12. Psychoses with other somatic diseases, total . . . . .				6	6	12
Cardio-renal diseases . . . . .	2	2	4			
Other diseases or conditions . . . . .	4	4	8			
13. Manic-depressive psychoses, total . . . . .				22	14	36
Manic type . . . . .	10	4	14			
Depressive type . . . . .	12	10	22			
14. Involution melancholia . . . . .				4	12	16
15. Dementia praecox (schizophrenia) . . . . .				62	94	156
16. Paranoia and paranoid conditions . . . . .				1	3	4
17. Epileptic psychoses . . . . .				3	6	9
18. Psychoneuroses and neuroses, total . . . . .				9	7	16
Hysterical type . . . . .	—	2	2			
Psychasthenic type (anxiety and obsessive forms) . . . . .	3	4	7			
Neurasthenic type . . . . .	4	1	5			
Other types . . . . .	2	—	2			
19. Psychoses with psychopathic personality . . . . .				—	—	—
20. Psychoses with mental deficiency . . . . .				10	10	20
21. Undiagnosed psychoses . . . . .				—	—	—
22. Without psychosis, others . . . . .				1	—	1
Total . . . . .				257	244	501

TABLE 7. *Race of First Admissions Classified with Reference to Principal Psychoses*

RACE	Total			Traumatic			Senile			With cerebral arterio-sclerosis		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
African (black)	4	5	9	—	—	—	—	—	—	1	3	4
Armenian	4	3	7	—	—	—	—	1	1	—	—	—
Chinese	1	—	1	—	—	—	—	—	—	—	—	—
Dutch and Flemish	—	—	—	—	—	—	—	—	—	—	1	1
English	68	76	144	1	—	1	—	5	5	23	32	55
Finnish	2	—	2	—	—	—	—	—	—	2	—	2
French	17	23	40	—	—	—	—	1	1	4	4	8
German	2	6	8	—	—	—	—	—	—	1	2	3
Greek	4	1	5	—	—	—	—	—	—	—	—	—
Hebrew	7	13	20	—	—	—	—	1	1	2	1	3
Irish	56	49	105	1	—	1	3	2	5	21	8	29
Italian <sup>1</sup>	19	10	29	—	—	—	—	—	—	2	—	2
Lithuanian	1	3	4	—	—	—	—	—	—	1	—	1
Magyar	1	1	2	—	—	—	—	—	—	1	—	1
Portuguese	2	—	2	—	—	—	—	—	—	—	—	—
Scandinavian <sup>2</sup>	5	3	8	—	—	—	—	—	—	—	1	1
Scotch	1	—	1	—	—	—	—	—	—	—	—	—
Slavonic <sup>3</sup>	12	4	16	—	—	—	—	—	—	—	1	1
Syrian	1	—	1	—	—	—	—	—	—	—	—	—
Turkish	1	—	1	—	—	—	—	—	—	—	—	—
Other specific races	1	—	1	—	—	—	—	—	—	—	—	—
Mixed	39	37	76	—	—	—	2	2	4	9	9	18
Race unascertained	9	9	18	—	—	—	2	3	5	4	3	7
Total	257	244	501	2	—	2	7	15	22	71	65	136

TABLE 7. *Race of First Admissions Classified with Reference to Principal Psychoses — Continued*

RACE	General paralysis			With cerebral syphilis			With Huntington's chorea			With other brain or nervous diseases			Alcoholic		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
African (black)	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Armenian	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chinese	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dutch and Flemish	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
English	6	1	7	2	—	2	—	1	1	—	4	4	2	—	2
Finnish	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
French	4	—	4	—	—	—	—	—	—	—	—	—	2	—	2
German	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—
Greek	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Hebrew	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Irish	1	—	1	—	—	—	—	—	—	1	1	2	—	—	—
Italian <sup>1</sup>	1	—	1	3	1	4	—	—	—	3	1	4	8	1	9
Lithuanian	—	—	—	—	—	—	—	—	—	—	—	—	2	—	2
Magyar	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Portuguese	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scandinavian <sup>2</sup>	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Scotch	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Slavonic <sup>3</sup>	1	—	1	—	—	—	—	—	—	—	—	—	6	—	6
Syrian	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—
Turkish	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—
Other specific races	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Mixed	3	1	4	1	—	1	—	—	—	1	—	1	4	—	4
Race unascertained	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—
Total	18	3	21	8	1	9	—	1	1	6	6	12	26	1	27

<sup>1</sup>Includes "North" and "South"...<sup>2</sup>Norwegians, Danes, and Swedes.<sup>3</sup>Includes Bohemian, Bosnian, Croatian, Dalmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Servian, Slovak, Slovenian.



TABLE 7. *Race of First Admissions Classified with Reference to Principal Psychoses — Continued*

RACE	Due to drugs and other exogenous toxins			With other somatic diseases			Manic-depressive			Involution melancholia			Dementia praecox		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
African (black)	—	—	—	—	—	—	—	—	—	—	—	—	2	2	4
Armenian	—	—	—	—	—	—	1	—	1	—	—	—	3	2	5
Chinese	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Dutch and Flemish	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
English	—	—	—	1	1	2	7	7	14	1	3	4	16	13	29
Finnish	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
French	—	—	—	—	—	—	—	2	2	—	2	2	6	13	19
German	—	—	—	—	1	1	—	—	—	—	1	1	1	—	1
Greek	—	—	—	—	—	—	1	—	1	—	—	—	1	1	2
Hebrew	—	—	—	—	—	—	—	—	—	1	—	1	2	8	10
Irish	—	—	—	1	2	3	7	5	12	—	3	3	9	20	29
Italian <sup>1</sup>	—	—	—	1	1	2	1	—	1	—	—	—	7	7	14
Lithuanian	—	—	—	—	—	—	—	—	—	—	—	—	—	3	3
Magyar	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Portuguese	—	—	—	—	—	—	1	—	1	—	—	—	1	—	1
Scandinavian <sup>2</sup>	—	—	—	—	—	—	1	—	1	—	1	1	1	1	2
Scotch	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Slavonic <sup>3</sup>	—	—	—	—	—	—	1	—	1	—	—	—	3	1	4
Syrian	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Turkish	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other specific races	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Mixed	—	—	—	2	—	2	2	—	2	2	2	4	9	20	29
Race unascertained	1	—	1	1	1	2	—	—	—	—	—	—	—	2	2
Total	1	—	1	6	6	12	22	14	36	4	12	16	62	94	156

TABLE 7. *Race of First Admissions Classified with Reference to Principal Psychoses — Concluded*

RACE	Paranoia and paranoid conditions			Epileptic psychoses			Psycho-neuroses and neuroses			With mental deficiency			Without psychoses		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
African (black)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Armenian	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chinese	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dutch and Flemish	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
English	—	1	1	1	1	2	4	3	7	4	4	8	—	—	—
Finnish	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
French	—	—	—	—	—	—	1	—	1	—	1	1	—	—	—
German	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—
Greek	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—
Hebrew	—	—	—	—	1	1	1	—	1	—	1	1	—	—	—
Irish	—	2	2	—	—	—	1	3	4	1	2	3	—	—	—
Italian <sup>1</sup>	—	—	—	—	1	1	1	—	1	1	—	1	—	—	—
Lithuanian	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Magyar	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Portuguese	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scandinavian <sup>2</sup>	1	—	1	—	—	—	1	—	1	—	—	—	—	—	—
Scotch	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—
Slavonic <sup>3</sup>	—	—	—	1	—	1	—	—	—	—	2	2	—	—	—
Syrian	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Turkish	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other specific races	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Mixed	—	—	—	1	2	3	—	1	1	2	—	2	1	—	1
Race unascertained	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total	1	3	4	3	6	9	9	7	16	10	10	20	1	—	1

<sup>1</sup>Includes "North" and "South".<sup>2</sup>Norwegians, Danes and Swedes.<sup>3</sup>Includes Bohemian, Bosnian, Croatian, Dalmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Servian, Slovak, Slovenian.

TABLE 8. *Age of First Admissions Classified with Reference to Principal Psychoses*

PSYCHOSES	Total			Under 15 years			15-19 years			20-24 years		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	2	—	2	—	—	—	—	—	—	—	—	—
2. Senile . . . . .	7	15	22	—	—	—	—	—	—	—	—	—
3. With cerebral arteriosclerosis . . . . .	71	65	136	—	—	—	—	—	—	—	—	—
4. General paralysis . . . . .	18	3	21	—	—	—	—	—	—	—	—	—
5. With cerebral syphilis . . . . .	8	1	9	—	—	—	—	—	—	—	—	—
6. With Huntington's chorea . . . . .	—	1	1	—	—	—	—	—	—	—	—	—
7. With brain tumor . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases . . . . .	6	6	12	—	1	1	1	1	2	—	—	—
9. Alcoholic . . . . .	26	1	27	—	—	—	—	—	—	—	—	—
10. Due to drugs and other exogenous toxins . . . . .	1	—	1	—	—	—	—	—	—	—	—	—
11. With pellagra . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases . . . . .	6	6	12	—	—	—	—	—	—	—	—	—
13. Manic-depressive . . . . .	22	14	36	—	—	—	—	1	1	3	—	3
14. Involution melancholia . . . . .	4	12	16	—	—	—	—	—	—	—	—	—
15. Dementia praecox . . . . .	62	94	156	—	1	1	12	12	24	14	9	23
16. Paranoia and paranoid conditions . . . . .	1	3	4	—	—	—	—	—	—	—	—	—
17. Epileptic psychoses . . . . .	3	6	9	—	—	—	1	—	1	—	—	—
18. Psychoneuroses and neuroses . . . . .	9	7	16	—	—	—	1	—	1	2	—	2
19. With psychopathic personality . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency . . . . .	10	10	20	1	—	1	—	—	—	4	—	4
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
22. Without psychosis . . . . .	1	—	1	—	—	—	—	—	—	1	—	1
Total . . . . .	257	244	501	1	2	3	15	14	29	24	9	33

TABLE 8. *Age of First Admissions Classified with Reference to Principal Psychoses — Continued*

PSYCHOSES	25-29 years			30-34 years			35-39 years			40-44 years			45-49 years		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—
2. Senile . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3. With cerebral arteriosclerosis . . . . .	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—
4. General paralysis . . . . .	—	—	—	3	—	3	1	—	1	4	1	5	3	—	3
5. With cerebral syphilis . . . . .	—	—	—	—	—	—	2	1	3	2	—	2	—	—	—
6. With Huntington's chorea . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases . . . . .	2	—	2	2	1	3	—	1	1	—	—	—	1	—	1
9. Alcoholic . . . . .	2	—	2	—	—	—	4	—	4	3	—	3	5	1	6
10. Due to drugs and other exo- toxins . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11. With pellagra . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases . . . . .	—	1	1	1	—	1	—	1	1	—	—	—	—	2	2
13. Manic-depressive . . . . .	3	2	5	3	3	6	1	2	3	3	2	5	4	1	5
14. Involution melancholia . . . . .	—	—	—	—	—	—	—	—	—	—	2	2	1	2	3
15. Dementia praecox . . . . .	10	20	30	4	8	12	7	11	18	7	8	15	5	14	19
16. Paranoia and paranoid con- ditions . . . . .	—	—	—	1	—	1	—	1	1	—	1	1	—	1	1
17. Epileptic psychoses . . . . .	—	1	1	—	3	3	1	—	1	—	—	—	—	—	—
18. Psychoneuroses and neuroses . . . . .	1	—	1	—	1	1	1	3	4	3	1	4	—	1	1
19. With psychopathic person- ality . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency . . . . .	—	1	1	1	2	3	1	3	4	3	2	5	—	1	1
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
22. Without psychosis . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total . . . . .	18	25	43	16	18	34	18	23	41	26	17	43	19	23	42

TABLE 8. *Age of First Admissions Classified with Reference to Principal Psychoses — Concluded*

PSYCHOSES	50-54 years			55-59 years			60-64 years			65-69 years			70 years and over		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
2. Senile . . . . .	-	-	-	-	-	-	-	2	2	3	3	6	4	10	14
3. With cerebral arteriosclerosis . . . . .	1	2	3	8	2	10	16	17	33	12	13	25	33	31	64
4. General paralysis . . . . .	2	-	2	2	-	2	1	1	2	2	-	2	-	1	1
5. With cerebral syphilis . . . . .	-	-	-	1	-	1	2	-	2	-	-	-	1	-	1
6. With Huntington's chorea . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
7. With brain tumor . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases . . . . .	-	2	2	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic . . . . .	5	-	5	5	-	5	2	-	2	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
11. With pellagra . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases . . . . .	-	-	-	2	-	2	1	-	1	2	1	3	-	1	1
13. Manic-depressive . . . . .	-	1	1	3	1	4	2	1	3	-	-	-	-	-	-
14. Involution melancholia . . . . .	1	3	4	2	2	4	-	3	3	-	-	-	-	-	-
15. Dementia praecox . . . . .	3	6	9	-	3	3	-	1	1	-	-	-	-	1	1
16. Paranoia and paranoid conditions . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses . . . . .	1	1	2	-	-	-	-	1	1	-	-	-	-	-	-
18. Psychoneuroses and neuroses . . . . .	-	1	1	-	-	-	1	-	1	-	-	-	-	-	-
19. With psychopathic personality . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
20. With mental deficiency . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total . . . . .	13	17	30	23	8	31	25	26	51	19	17	36	40	45	85



TABLE 9. Degree of Education of First Admissions Classified with Reference to Principal Psychoses

PSYCHOSES	Total			Illiterate			Reads and writes			Common school			High School			College			Unascertained					
	F.			T.			M.			F.			T.			M.			F.			T.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
1. Traumatic . . . . .	2	15	22	-	3	3	2	1	3	1	4	5	1	1	3	-	-	-	-	2	6	8		
2. Senile . . . . .	7	65	136	2	4	6	3	5	8	44	37	81	10	9	19	-	-	-	-	12	9	21		
3. With cerebral arteriosclerosis . . . . .	18	3	21	1	1	2	2	3	5	9	2	11	4	-	4	-	-	-	-	2	1	3		
4. General paralysis . . . . .	8	1	9	-	-	-	1	3	4	3	-	3	-	-	-	-	-	-	-	1	1	1		
5. With cerebral syphilis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
6. With Huntington's chorea . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
7. With brain tumor . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
8. With other brain or nervous diseases . . . . .	6	6	12	1	1	2	1	-	1	3	3	6	2	2	2	1	-	1	-	-	-	-		
9. Alcoholic . . . . .	26	1	27	4	-	4	3	-	3	13	-	13	2	1	3	-	-	-	-	4	-	4		
10. Due to drugs and other exogenous toxins . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1		
11. With pellagra . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
12. With other somatic diseases . . . . .	6	6	12	1	-	1	1	1	2	2	3	5	-	-	-	-	-	-	-	1	1	2		
13. Manic-depressive . . . . .	22	14	36	-	-	-	-	-	1	15	6	21	4	6	10	1	1	2	2	2	2	2		
14. Involution melancholia . . . . .	4	12	16	-	-	-	-	2	2	2	10	12	-	-	-	1	1	1	1	1	1	1		
15. Dementia praecox . . . . .	62	94	156	5	1	6	3	6	9	34	49	83	14	30	44	5	1	6	1	7	8	8		
16. Paranoia and paranoid conditions . . . . .	1	3	4	-	-	-	-	-	-	-	1	1	1	2	3	-	-	-	-	-	-	-		
17. Epileptic psychoses . . . . .	3	6	9	-	1	1	-	-	-	3	3	6	1	1	1	-	-	-	-	-	1	1		
18. Psychoneuroses and neuroses . . . . .	9	7	16	1	1	1	-	-	-	6	2	8	2	4	6	-	1	1	-	-	-	-		
19. With psychopathic personality . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
20. With mental deficiency . . . . .	10	10	20	1	2	3	2	6	8	6	2	8	-	-	-	-	-	-	-	1	-	1		
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
22. Without psychoses . . . . .	1	-	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-		
Total. . . . .	257	244	501	17	12	29	22	21	43	143	122	265	40	56	96	8	6	14	27	27	54	54		



TABLE 11. *Economic Condition of First Admissions Classified with Reference to Principal Psychoses*

PSYCHOSES	Total			Dependent			Marginal			Com- fortable			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	2	—	2	—	—	—	2	—	2	—	—	—	—	—	—
2. Senile . . . . .	7	15	22	4	7	11	3	8	11	—	—	—	—	—	—
3. With cerebral arteriosclerosis . . . . .	71	65	136	27	29	56	42	36	78	—	—	—	2	—	2
4. General paralysis . . . . .	18	3	21	6	1	7	12	2	14	—	—	—	—	—	—
5. With cerebral syphilis . . . . .	8	1	9	4	—	4	4	1	5	—	—	—	—	—	—
6. With Huntington's chorea . . . . .	—	1	1	—	1	1	—	—	—	—	—	—	—	—	—
7. With brain tumor . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases . . . . .	6	6	12	3	2	5	3	4	7	—	—	—	—	—	—
9. Alcoholic . . . . .	26	1	27	5	—	5	21	1	22	—	—	—	—	—	—
10. Due to drugs and other exogenous toxins . . . . .	1	—	1	—	—	—	1	—	1	—	—	—	—	—	—
11. With pellagra . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases . . . . .	6	6	12	2	2	4	4	4	8	—	—	—	—	—	—
13. Manic-depressive . . . . .	22	14	36	5	2	7	17	12	29	—	—	—	—	—	—
14. Involution melancholia . . . . .	4	12	16	1	2	3	3	10	13	—	—	—	—	—	—
15. Dementia praecox . . . . .	62	94	156	23	26	49	38	68	106	1	—	1	—	—	—
16. Paranoia and paranoid conditions . . . . .	1	3	4	—	—	—	1	3	4	—	—	—	—	—	—
17. Epileptic psychoses . . . . .	3	6	9	1	5	6	2	1	3	—	—	—	—	—	—
18. Psychoneuroses and neuroses . . . . .	9	7	16	4	1	5	5	5	10	—	1	1	—	—	—
19. With psychopathic personality . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency . . . . .	10	10	20	9	8	17	1	2	3	—	—	—	—	—	—
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
22. Without psychosis . . . . .	1	—	1	—	—	—	1	—	1	—	—	—	—	—	—
Total . . . . .	257	244	501	94	86	180	160	157	317	1	1	2	2	—	2

TABLE 12. *Use of Alcohol by First Admissions Classified with Reference to Principal Psychoses*

PSYCHOSES	Total			Abstinent			Temperate			Intemperate			Unascertained		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	2	—	2	2	—	2	—	—	—	—	—	—	—	—	—
2. Senile . . . . .	7	15	22	2	13	15	2	—	2	2	—	2	1	2	3
3. With cerebral arteriosclerosis . . . . .	71	65	136	33	59	92	23	4	27	14	1	15	1	1	2
4. General paralysis . . . . .	18	3	21	3	3	6	4	—	4	11	—	11	—	—	—
5. With cerebral syphilis . . . . .	8	1	9	2	1	3	5	—	5	1	—	1	—	—	—
6. With Huntington's chorea . . . . .	—	1	1	—	1	1	—	—	—	—	—	—	—	—	—
7. With brain tumor . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases . . . . .	6	6	12	6	3	9	—	2	2	—	—	—	—	1	1
9. Alcoholic . . . . .	26	1	27	—	—	—	—	—	—	26	1	27	—	—	—
10. Due to drugs and other exogenous toxins . . . . .	1	—	1	—	—	—	—	—	—	1	—	1	—	—	—
11. With pellagra . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases . . . . .	6	6	12	3	5	8	3	—	3	—	—	—	—	1	1
13. Manic-depressive . . . . .	22	14	36	14	12	26	5	1	6	2	1	3	1	—	1
14. Involution melancholia . . . . .	4	12	16	3	10	13	1	2	3	—	—	—	—	—	—
15. Dementia praecox . . . . .	62	94	156	40	79	119	17	10	27	5	2	7	—	3	3
16. Paranoia and paranoid conditions . . . . .	1	3	4	1	3	4	—	—	—	—	—	—	—	—	—
17. Epileptic psychoses . . . . .	3	6	9	1	5	6	1	—	1	1	1	2	—	—	—
18. Psychoneuroses and neuroses . . . . .	9	7	16	4	7	11	5	—	5	—	—	—	—	—	—
19. With psychopathic personality . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency . . . . .	10	10	20	9	8	17	1	—	1	—	2	2	—	—	—
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
22. Without psychosis . . . . .	1	—	1	—	—	—	—	—	—	—	—	—	1	—	1
Total . . . . .	257	244	501	123	209	332	67	19	86	63	8	71	4	8	12



TABLE 13. *Marital Condition of First Admissions Classified with Reference to Principal Psychoses*

PSYCHOSES	Total			Single		Married		Widowed		Separated		Divorced		Unascertained	
	Total			Single		Married		Widowed		Separated		Divorced			
	M.	F.	T.	M	F.	T.	M.	F.	T.	M.	F.	T.	M.		F.
1. Traumatic . . . . .	2	—	2	—	—	—	2	—	2	—	—	—	—	—	—
2. Senile . . . . .	7	15	22	1	1	2	3	4	3	10	13	—	—	—	—
3. With cerebral arteriosclerosis . . . . .	71	65	136	16	8	24	38	22	16	35	51	—	—	1	—
4. General paralysis . . . . .	18	3	21	6	—	6	10	2	2	1	2	—	—	—	—
5. With cerebral syphilis . . . . .	8	1	9	—	—	—	5	1	2	—	—	—	—	—	—
6. With Huntington's chorea . . . . .	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases . . . . .	6	6	12	6	4	10	—	2	2	—	—	—	—	—	—
9. Alcoholic . . . . .	26	1	27	12	—	12	11	1	1	1	2	—	2	—	—
10. Due to drugs and other exogenous toxins . . . . .	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—
11. With pellagra . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases . . . . .	6	6	12	—	1	1	4	3	7	2	2	4	—	—	—
13. Manic-depressive . . . . .	22	14	36	8	4	12	10	8	18	3	2	5	1	—	—
14. Involution melancholia . . . . .	4	12	16	—	4	4	4	7	11	1	1	—	—	—	—
15. Dementia praecox . . . . .	62	94	156	45	52	97	17	35	52	—	3	3	—	3	—
16. Paranoia and paranoid conditions . . . . .	1	3	4	1	1	2	2	2	3	—	—	—	—	—	—
17. Epileptic psychoses . . . . .	3	9	12	1	3	4	1	4	5	—	1	1	1	—	—
18. Psychoneuroses and neuroses . . . . .	9	7	16	8	2	10	1	4	5	—	—	—	—	—	—
19. With psychopathic personality . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency . . . . .	10	10	20	9	6	15	—	4	4	—	—	—	1	—	—
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
22. Without psychosis . . . . .	1	—	1	—	—	—	1	—	—	—	—	—	—	—	—
Total. . . . .	257	244	501	113	87	200	108	96	204	29	56	85	1	1	2
													5	4	9

TABLE 14. *Psychoses of Readmissions*

	PSYCHOSES	Males	Females	Total
1. Traumatic psychoses		—	—	—
2. Senile psychoses		—	1	1
3. Psychoses with cerebral arteriosclerosis		3	5	8
4. General paralysis		4	3	7
5. Psychoses with cerebral syphilis		—	—	—
6. Psychoses with Huntington's chorea		—	—	—
7. Psychoses with brain tumor		—	—	—
8. Psychoses with other brain or nervous diseases		1	—	1
9. Alcoholic psychoses		4	—	4
10. Psychoses due to drugs and other exogenous toxins		—	—	—
11. Psychoses with pellagra		—	—	—
12. Psychoses with other somatic diseases		—	3	3
13. Manic-depressive		18	16	34
14. Involution melancholia		—	3	3
15. Dementia praecox		23	29	52
16. Paranoia and paranoid conditions		—	1	1
17. Epileptic psychoses		2	—	2
18. Psychoneuroses and neuroses		—	4	4
19. Psychoses with psychopathic personality		—	—	—
20. Psychoses with mental deficiency		—	3	3
21. Undiagnosed psychoses		—	—	—
22. Without psychosis		—	—	—
Total		55	68	123

TABLE 15. *Discharges of Patients Classified with Reference to Principal Psychoses and Condition on Discharge*

PSYCHOSES	Total			Improved			Unimproved		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	—	—	—	—	—	—	—	—	—
2. Senile	3	4	7	3	3	6	—	1	1
3. With cerebral arteriosclerosis	11	6	17	9	4	13	2	2	4
4. General paralysis	10	2	12	9	2	11	1	—	1
5. With cerebral syphilis	1	1	2	1	1	2	—	—	—
6. With Huntington's chorea	—	—	—	—	—	—	—	—	—
7. With brain tumor	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases	2	2	4	1	1	2	1	1	2
9. Alcoholic	9	1	10	9	1	10	—	—	—
10. Due to drugs and other exogenous toxins	—	1	1	—	1	1	—	—	—
11. With pellagra	—	—	—	—	—	—	—	—	—
12. With other somatic diseases	4	5	9	2	5	7	2	—	2
13. Manic-depressive	18	17	35	16	16	32	2	1	3
14. Involution melancholia	—	6	6	—	5	5	—	1	1
15. Dementia praecox	39	47	86	35	43	78	4	4	8
16. Paranoia and paranoid conditions	3	1	4	3	1	4	—	—	—
17. Epileptic psychoses	1	3	4	1	3	4	—	—	—
18. Psychoneuroses and neuroses	2	5	7	2	5	7	—	—	—
19. With psychopathic personality	1	1	2	1	1	2	—	—	—
20. With mental deficiency	1	8	9	1	8	9	—	—	—
21. Undiagnosed psychoses	—	—	—	—	—	—	—	—	—
22. Without psychosis	2	2	4	—	—	—	—	—	—
Total	107	112	219	93	100	193	12	10	22

TABLE 15A. *Hospital Residence During This Admission of First Court Admissions Discharged During 1933*

PSYCHOSES	Number			Average Net Hospital Residence in Years		
	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	—	—	—	—	—	—
2. Senile . . . . .	3	3	6	.50	.50	.50
3. With cerebral arteriosclerosis . . . . .	11	5	16	1.09	.40	.87
4. General paralysis . . . . .	8	2	10	1.33	.50	1.16
5. With cerebral syphilis . . . . .	1	—	1	.50	—	.50
6. With Huntington's chorea . . . . .	—	—	—	—	—	—
7. With brain tumor . . . . .	—	—	—	—	—	—
8. With other brain or nervous diseases . . . . .	2	2	4	.85	.77	.81
9. Alcoholic . . . . .	7	1	8	.64	.50	.63
10. Due to drugs and other exogenous toxins . . . . .	—	1	1	—	.50	.50
11. With pellagra . . . . .	—	—	—	—	—	—
12. With other somatic diseases . . . . .	4	4	8	.31	.50	.40
13. Manic-depressive . . . . .	8	10	18	1.15	.90	1.01
14. Involution melancholia . . . . .	—	4	4	—	1.25	1.25
15. Dementia praecox . . . . .	27	47	74	1.13	1.59	1.43
16. Paranoia and paranoid conditions . . . . .	3	—	3	1.17	—	1.17
17. Epileptic psychoses . . . . .	1	2	3	.50	1.50	1.17
18. Psychoneuroses and neuroses . . . . .	1	4	5	.50	.41	.43
19. With psychopathic personality . . . . .	1	—	1	1.50	—	1.50
20. With mental deficiency . . . . .	1	5	6	.50	1.30	1.17
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—
22. Without psychoses . . . . .	1	1	2	.20	.50	.35
Total . . . . .	79	91	170	1.00	1.20	1.11



TABLE 16. Causes of Death of Patients Classified with Reference to Principal Psychoses

CAUSES OF DEATH	Total			Senile		With cerebral arterio-sclerosis		General paralysis		Alcoholic		Manic-depressive	
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.
<i>Epidemic, Endemic and Infectious Diseases</i>													
Tuberculosis of the respiratory system . . . . .	11	9	20	-	-	-	1	-	1	-	-	-	-
Syphilis (non-nervous forms) . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-
Purulent infection, septicaemia . . . . .	-	2	2	-	-	-	-	1	1	-	-	-	-
<i>General Diseases not Included in Class I</i>													
Cancer and other malignant tumors . . . . .	3	3	6	1	1	2	1	1	2	1	-	1	-
Diabetes . . . . .	-	2	2	-	-	-	-	-	-	-	-	-	-
Other general diseases . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-
<i>Diseases of the Nervous System</i>													
Cerebral hemorrhage, apoplexy . . . . .	1	7	8	-	1	1	1	5	6	-	-	-	-
General paralysis of the insane . . . . .	9	2	11	-	-	-	-	9	1	10	-	-	-
Epilepsy . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-
<i>Diseases of the Circulatory System</i>													
Endocarditis and myocarditis . . . . .	49	47	96	7	8	15	28	21	49	3	1	4	1
Angina pectoris . . . . .	1	2	3	-	-	-	-	1	1	-	-	1	-
Other diseases of the heart . . . . .	1	6	7	-	1	1	1	1	2	-	-	-	1
Arteriosclerosis . . . . .	25	11	36	1	2	3	17	8	25	2	-	2	1
Other diseases of the arteries . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-
<i>Diseases of the Respiratory System</i>													
Bronchitis . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-
Bronchopneumonia . . . . .	3	17	20	-	2	2	2	4	6	-	-	1	2
Lobar pneumonia . . . . .	4	10	14	-	2	2	-	2	2	1	1	1	-
Other diseases of the respiratory system (tuberculosis excepted) . . . . .	-	2	2	-	-	-	-	1	1	-	-	-	-
<i>Diseases of the Digestive System</i>													
Diseases of the pharynx and tonsils . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-
Ulcer of stomach and duodenum . . . . .	1	1	2	-	-	-	-	-	-	-	-	-	-
Diarrhea and enteritis . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-
Appendicitis and typhlitis . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-
<i>Non-Veneral Diseases of Genito-Urinary System and Annexa</i>													
Nephritis . . . . .	3	1	4	1	-	1	-	-	-	-	-	-	-
Other diseases of genito-urinary system . . . . .	-	1	1	-	-	-	-	-	-	-	-	1	1
<i>Diseases of the Skin and of the Cellular Tissue</i>													
Other diseases of skin and annexa . . . . .	-	1	1	-	1	1	-	-	-	-	-	-	-
<i>External Causes</i>													
Accidental traumatism . . . . .	4	3	7	1	1	2	1	1	2	1	-	1	1
Total . . . . .	118	131	249	11	19	30	52	45	97	7	2	9	4

TABLE 16. Causes of Death of Patients Classified with Reference to Principal Psychoses — Concluded

CAUSES OF DEATH	Involution melancholia		Dementia praecox		Paranoia and paranoid conditions		Epileptic psychoses		With psychopathic personality		With mental deficiency		*All other psychoses
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
<i>Epidemic, Endemic and Infectious Diseases</i>													
Tuberculosis of the respiratory system	-	-	-	7	8	15	-	-	-	-	3	3	-
Syphilis (non-nervous forms)	-	-	-	-	-	-	-	-	-	-	-	-	1
Purulent infection, septicaemia	-	-	-	-	1	1	-	-	-	-	-	-	-
<i>General Diseases not Included in Class I</i>													
Cancer and other malignant tumors	-	-	-	-	-	-	-	-	-	-	-	-	1
Diabetes	-	-	-	-	-	-	-	-	-	-	-	-	2
Other general diseases	-	-	-	1	1	1	-	-	-	-	-	-	-
<i>Diseases of the Nervous System</i>													
Cerebral hemorrhage, apoplexy	-	-	-	-	1	1	-	-	-	-	-	-	-
General paralysis of the insane	-	1	1	-	-	-	-	-	-	-	-	-	-
Epilepsy	-	-	-	-	-	-	-	1	1	-	-	-	-
<i>Diseases of the Circulatory System</i>													
Endocarditis and myocarditis	-	5	5	4	8	12	1	1	1	2	1	2	3
Angina pectoris	-	-	-	-	2	2	-	-	-	-	1	1	2
Other diseases of the heart	-	-	-	-	1	1	-	-	-	-	-	-	3
Arteriosclerosis	-	-	-	-	1	1	-	-	-	-	-	-	-
Other diseases of the arteries	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>Diseases of the Respiratory System</i>													
Bronchitis	-	-	-	1	1	1	-	-	-	-	-	-	-
Bronchopneumonia	-	-	-	-	-	-	-	-	-	-	1	1	4
Lobar pneumonia	-	-	-	2	3	5	-	-	-	-	2	2	1
Other diseases of the respiratory system (tuberculosis excepted)	-	-	-	-	-	-	-	-	-	-	-	-	1
<i>Diseases of the Digestive System</i>													
Diseases of the pharynx and tonsils	-	-	-	-	-	-	-	-	-	-	-	-	1
Ulcer of stomach and duodenum	1	1	1	-	-	-	-	-	-	-	-	-	-
Diarrhea and enteritis	-	-	-	-	1	1	-	-	-	-	-	-	-
Appendicitis and typhlitis	-	-	-	-	-	-	-	1	1	-	-	-	-
<i>Non-Veneral Diseases of the Genito-Urinary System and Annexa</i>													
Nephritis	-	-	-	2	-	2	-	-	-	-	-	-	1
Other diseases of genito-urinary system	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>Diseases of the Skin and of the Cellular Tissue</i>													
Other diseases of skin and annexa	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>External Causes</i>													
Accidental traumatism	-	-	-	1	-	1	-	-	-	-	-	-	-
Total	1	6	7	19	30	49	1	-	1	2	2	4	7
													13
													20

\*Includes group 22, "without psychoses"

TABLE 17. Age of Patients at Time of Death Classified with Reference to Principal Psychoses

PSYCHOSES			Total			15-19 years		20-24 years		25-29 years		30-34 years		35-39 years			
			M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1.	Traumatic	.	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
2.	Senile	.	11	19	30	-	-	-	-	-	-	-	-	-	-	-	-
3.	With cerebral arteriosclerosis	.	52	45	97	-	-	-	-	-	-	-	-	-	-	-	-
4.	General paralysis	.	9	2	11	-	-	-	-	-	-	-	-	-	-	1	1
5.	With cerebral syphilis	.	2	-	2	-	-	-	-	-	-	-	-	-	-	-	-
6.	With Huntington's chorea	.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7.	With brain tumor	.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8.	With other brain or nervous diseases	.	1	4	5	-	-	-	-	1	1	-	-	-	-	1	1
9.	Alcoholic	.	7	2	9	-	-	-	-	-	-	-	-	-	1	-	-
10.	Due to drugs and other exogenous toxins	.	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-
11.	With pellagra	.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12.	With other somatic diseases	.	3	8	11	-	-	-	1	1	1	-	1	1	-	1	1
13.	Manic-depressive	.	4	4	8	-	-	-	-	-	-	-	1	1	-	-	-
14.	Involution melancholia	.	1	6	7	-	-	-	-	-	-	-	-	-	-	-	-
15.	Dementia precox	.	19	30	49	1	1	2	1	1	3	3	6	4	5	2	7
16.	Paranoia and paranoid conditions	.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17.	Epileptic psychoses	.	2	2	4	-	2	2	-	-	-	-	-	-	1	-	1
18.	Psychoneuroses and neuroses	.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
19.	With psychopathic personality	.	1	2	3	-	-	-	-	-	-	-	-	-	-	-	-
20.	With mental deficiency	.	4	6	10	-	-	-	-	-	-	-	1	1	-	2	2
21.	Undiagnosed psychoses	.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22.	Without psychosis	.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total			118	131	249	1	3	4	1	1	2	3	5	8	1	6	7





TABLE 18. *Total Duration of Hospital Life of Patients Dying in Hospital Classified with Reference to Principal Psychoses*

PSYCHOSES	Total			Less than 1 month		1-3 months		4-7 months		8-12 months		1-2 years		3-4 years	
				M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	1	-	1	-	-	3	-	-	-	-	-	-	1	-	1
2. Senile . . . . .	11	19	30	13	3	46	2	4	6	-	-	-	8	10	18
3. With cerebral arteriosclerosis . . . . .	52	45	97	14	14	28	14	10	24	3	2	5	5	8	13
4. General paralysis . . . . .	9	2	11	3	-	3	2	-	2	-	-	-	4	1	5
5. With cerebral syphilis . . . . .	2	-	2	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7. With brain tumor . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases . . . . .	1	4	5	-	1	1	-	-	-	-	1	1	-	1	1
9. Alcoholic . . . . .	7	2	9	1	1	1	-	-	-	1	1	1	-	-	-
10. Due to drugs and other exogenous toxins . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases . . . . .	3	8	11	1	3	4	1	1	1	1	1	1	2	3	3
13. Manic-depressive . . . . .	4	4	8	-	-	-	1	1	1	-	-	-	2	2	2
14. Involution melancholia . . . . .	1	6	7	-	1	1	1	1	1	-	-	-	1	1	1
15. Dementia præcox . . . . .	19	30	49	1	5	6	2	1	3	1	1	1	2	2	4
16. Paranoia and paranoid conditions . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses . . . . .	2	2	4	-	-	-	-	-	-	1	1	2	-	1	1
18. Psychoneuroses and neuroses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
19. With psychopathic personality . . . . .	1	2	3	-	-	-	-	-	-	-	-	-	-	-	-
20. With mental deficiency . . . . .	4	6	10	1	-	1	-	1	1	-	-	-	2	2	2
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total . . . . .	118	131	249	24	24	48	20	19	39	12	13	25	18	26	44
										5	6	11	10	11	21

TABLE 18. *Total Duration of Hospital Life of Patients Dying in Hospital Classified According to Principal Psychoses — Concluded*

Psychoses	5-6 years			7-8 years			9-10 years			11-12 years			13-14 years			15-19 years			20 years and over		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile	-	1	1	-	-	-	-	1	1	2	-	1	1	-	-	-	-	-	-	-	-
3. With cerebral arteriosclerosis	-	2	-	-	-	-	-	1	-	1	-	1	-	1	-	-	-	-	-	-	-
4. General paralysis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7. With brain tumor	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic	1	-	1	1	1	-	1	-	1	-	1	1	-	-	-	1	-	-	-	-	-
10. Due to drugs and other exogenous toxins	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases	-	1	1	1	1	-	1	1	1	-	-	-	-	1	1	-	1	1	-	1	1
13. Manic-depressive	1	-	-	-	-	-	-	1	1	2	-	-	-	-	-	-	-	-	-	-	-
14. Involution melancholia	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-
15. Dementia praecox	2	-	2	3	5	-	-	-	-	-	-	1	1	-	3	3	2	5	3	8	11
16. Paranoia and paranoid conditions	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
19. With psychopathic personality	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
20. With mental deficiency	-	-	-	-	-	-	-	3	1	4	-	-	-	-	-	-	-	-	1	1	2
21. Undiagnosed psychoses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2	2
22. Without psychosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	6	2	8	4	4	8	7	3	10	2	2	4	2	5	7	3	4	7	5	12	17

TABLE 19. *Average Length of Hospital Stay During the Present Admission of All Cases in Residence on September 30, 1933*

PSYCHOSES	Number			Average Length of Residence in Years		
	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	8	—	8	5.62	—	5.62
2. Senile . . . . .	17	36	53	4.14	4.24	4.21
3. With cerebral arteriosclerosis . . . . .	82	81	163	2.38	3.46	2.91
4. General paralysis . . . . .	62	19	81	4.18	6.65	4.76
5. With cerebral syphilis . . . . .	11	4	15	3.66	8.49	4.95
6. With Huntington's chorea . . . . .	2	2	4	10.00	1.98	5.99
7. With brain tumor . . . . .	—	—	—	—	—	—
8. With other brain or nervous diseases . . . . .	21	16	37	4.35	5.31	4.76
9. Alcoholic . . . . .	82	14	96	7.09	9.85	7.49
10. Due to drugs and other exogenous toxins . . . . .	—	1	1	—	22.50	22.50
11. With pellagra . . . . .	—	—	—	—	—	—
12. With other somatic diseases . . . . .	6	8	14	5.98	6.11	6.06
13. Manic-depressive . . . . .	79	117	196	5.69	7.74	6.91
14. Involution melancholia . . . . .	10	41	51	4.69	5.00	4.94
15. Dementia praecox . . . . .	487	610	1,097	9.03	9.61	9.35
16. Paranoia and paranoid conditions . . . . .	7	22	29	6.91	10.95	9.98
17. Epileptic psychoses . . . . .	12	13	25	3.82	6.73	5.33
18. Psychoneuroses and neuroses . . . . .	12	17	29	3.65	4.07	3.90
19. With psychopathic personality . . . . .	8	4	12	6.87	12.50	8.75
20. With mental deficiency . . . . .	85	126	211	8.84	7.64	8.12
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—
22. Without psychoses . . . . .	7	4	11	.89	.96	.91
Total . . . . .	998	1,136	2,134	7.20	8.20	7.73

TABLE 20. *Family Care Department*

	M.	F.	T.
Remaining in family care October 1, 1932 . . . . .	—	9	9
On Visit from family care October 1, 1932 . . . . .	—	—	—
Admitted during year . . . . .	—	—	—
Whole number of cases within the year . . . . .	—	9	9
Dismissed within the year . . . . .	—	—	—
Returned to institution . . . . .	—	—	—
Discharged . . . . .	—	1	1
Died . . . . .	—	—	—
On Visit . . . . .	—	—	—
Remaining in family care September 30, 1933 . . . . .	—	8	8
Supported by State . . . . .	—	7	7
Private . . . . .	—	1	1
Self-supporting . . . . .	—	—	—
Number of different persons within the year . . . . .	—	—	—
Number of different persons dismissed . . . . .	—	—	—
Number of different persons admitted . . . . .	—	—	—
Average daily number in family care during the year . . . . .	—	8.1	8.1
Supported by State . . . . .	—	7.1	7.1
Private . . . . .	—	1.0	1.0
Self-supporting . . . . .	—	—	—

